BEST AVAILABLE COPY

	PATENT	APPLICATIO Effect	RD				OCKET NUM	nber					
CLAIMS AS FILED - PART I								CAN C 3409T					
			(Column		(Column 2)			SMALL ENTITY TYPE		OTHER THAN OR SMALL ENTITY			
T	OTAL CLAIMS		19		Ð			RATE	FEE	٦	RATE	FEE	
FOR			NUMBER FILED		NUMBER EXTRA			BASIC F	EE 370.00	OR	BASIC FEE		
TOTAL CHARGEABLE CLAIMS			/ 🥎 minus 20=		•			X\$ 9=	:	OR	X\$18=		
INDEPENDENT CLAIMS			6 minus 3 =		* 3			X42=		┫ ̄	X84=		
ML	ILTIPLE DEPEN	NDENT CLAIM P	RESENT					7.12		OR	7042	352-	
* If the difference in column 1 is less than zero, enter "0" in column 2								+140=	_	OR	+280=		
CLAIMS AS AMENDED - PART II (2 1/2 /5								-TOTAI	- L	OR	TOTAL	992.	
_	· · · · · · · · · · · · · · · · · · ·	(Column 1)	· · · · · · · · · · · · · · · · · · ·			(Column 3)) 	SMAL	L ENTITY	OR	OTHER SMALL		
AMENDMENT A		REMAINING AFTER AMENDMENT		NUMI PREVIC PAID	BER DUSLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	. 5	Minus	* 2	20	- A		X\$ 9=		OR	X\$18=		
	Independent	. 5	Minus	***	6	-Ψ		X42=		OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=		OR	+280=		
								TOTA			TOTAL	,	
	(Column 1) (Column 2) (Column 3)								E	4	ADDIT. FEE		
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGH NUMI PREVIO PAID	BER	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
N N N	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=		
AME	Independent	•	Minus	***		=		X42=	†	OR	X84=		
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM								+140=	†	1	+280=		
								TOTA		OR	TOTAL		
(Column 1) (Column 2) (Column 3)								DDIT. FEI	: L	OR	ADDIT. FEE		
		CLAIMS		HIGHE		ST			I ADD:	ì		455:	
AMENDMENT C	•	REMAINING AFTER AMENDMENT	_	PREVIO PAID F	USLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE	
	Total	•	Minus	**		8	ľ	X\$ 9=		OR	X\$18=		
	Independent	•	Minus	***		s·	┟	X42=	1		X84=		
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM							+140=		OR			
- (1	* If the entry in column 1 is less than the entry in column 2, write "0" in column 3.									OR	+280=		
ois! es	**If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3." ADDIT. FE										TOTAL ODIT. FEE		
7	The *Highest Num	ber Previously Paid	For' (Total or	Independe	nt) is the	highest number	foun	d in the a	opropriate bo	in colu	ımn 1.		